a mod a below named inventor, I/we hereby declare that:

Me/our residence, post office address and citizenship are as stated below next to y/our name. I/we believe I am/we are the original, first and sole/joint inventor/s of the subject matter which is claimed and for which a patent is sought on the invention entitled

INDOLIN PHENYLSULFONAMIDE DERIVATIVES

the specification of which is attached hereto,

or was filed on June 30, 2003

as a PCT Application Serial No. PCT/EP2003/006896

I/we hereby state that I/we have reviewed and understand the contents of the above-identified specification, including the claims.

I/we acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I/we hereby claim priority benefits under Title 35, United States Code, \$119 and \$119(e)(1) of any foreign and/or U.S. provisional application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

102 29 777.0 (Number)

Germany (Country)

July 3, 2002 (Month/Day/Year Filed)

I/we hereby claim the benefit under Title 35, United States Code, \$120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, \$112, I/we acknowledge the duty to disclose the material information as defined in Title 37, Code of Federal Regulations, \$1.56 which occured between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status)	
	(patented, pending, a		
(Application Serial No.)	(Filing Date)	(Status)	

I/we hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Le A 35 987-US

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Jeffrey M. Greenman, Reg.No. 26,552
Tilman Breitenstein, Limited Recognition under 37 C.F.R. § 11.9(b)
Jerrie L. Chiu, Reg. No. 41,670
William F. Gray, Reg. No. 31,018
Susan M. Pellegrino, Reg. No. 48,972
Barbara A. Shimei, Reg. No. 29,862

•	Address all written correspondence to Customer No. 35969 Mr. Jeffrey M. Greenman Bayer Pharmaceuticals Corporation 400 Morgan Lane West Haven, Connecticut 06516		Direct Telephone Calls To: (203)812-3964(Jerrie L. Chiu)	
2	FULL NAME OF SOLE OR FIRST INVENTOR Hilmar Bischoff RESIDENCE D 42113 Wuppertal, Germany POST OFFICE ADDRESS c/o Bayer HealthCare AG, D 51368 Leverku	INVENTOR'S SIGNATURE	CITIZENSHIP German	ДАТЕ Д.2.05
(j	FULL NAME OF SECOND INVENTOR - Elke Dittrich-Wengenroth RESIDENCE D 42109 Wuppertal, Gemany POST OFFICE ADDRESS	THE STIGNATURE	CTIZENSHIP German	28.04.05
7.6 C	c/o Bayer HealthCare AG, D 51368 Leverku FULL NAME OF THIRD INVENTOR Martina Wuttke D 42111 Wuppertal, Germany POST OFFICE ADDRESS	Isen, Germany INVENTOR'S SIGNATURE	citizenship German	DATE 2-05
(d)	c/o Bayer HealthCare AG, D 51368 Levers FULL NAME OF FOURTH INVENTOR Heike Heckroth RESIDENCE D 42113 Wuppetal, Germany POST OFFICE ADDRESS	INVENTOR'S SEGNATURE	CITIZENSHIP German	DATE 04.07.05
2	c/o Bayer HealthCare AG, D 51368 Leverku FULL NAME OF FIFTH INVENTOR Wolfgang Thielemann RESIDENCE D 42107 Wuppertal, Germany POST OFFICE ADDRESS	Isen, Germany INVENTOR S SIGNATURE	CITIZENSHIP German	DATE 1)09.02.05
6	c/o Bayer HealthCare AG, D 51368 Leverkt FULL NAME OF SIXTH INVENTOR Michael Woltering RESIDENCE D 40721 Wuppertal, Germany	Isen, Germany INVENTOR'S SIGNATURE	CITIZENSHIP, German	DATE 03.05
メント	POST OFFICE ADDRESS c/o LANXESS Deutschland GmbH, D 51369 Lo FULL NAME OF SEVENTH INVENTOR Michael Otteneder RESIDENCE CH-4144 Arlesheim. Switzerland	INVENTOR'S SIGNATURE		DATE 11.04.200 5

Le A 35 987-US

Obere Gasse 12A, CH-4144 Arlesheim, Switzerland

R